PERMITTEE NAME/ADDRESS:

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

MONITORING PERIOD

Form Approved OMB No. 2040-0004

NAME: ANCHORAGE, MUNICIPALITY OF

3000 ARCTIC BLVD. **ANCHORAGE**

AK 99503-3898

DISCHARGE MONITORING REPORT (DMR) AK0022551 PERMIT NUMBER

001 A DISCHARGE NUMBER

MAJOR (SUBR 02) F - FINAL

1015 03/18/08 &

FACILITY:

AÎTN:

ADDRESS:

JOHN M. ASPLUND WWTF-301 (H)

LOCATION: ANCHORAGE, AK 99502

MARK PREMO P.E. GEN MGR. AWWU

*** NO DISCHARGE 08 | 02 | 01 08 | 02 | 29 FROM TO NOTE: Read instructions before completing this form.

THE INDICE IN TAILOR	······ OFIT INIO	1.711110					NOTE: Nead Itisti	GODOLIO POL		thicnia mia	torm.	
PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO.	FREQUENCY OF S	SAMPLE	
-		AVERAGE	MAXIMUM	- UNITS T	7 GMININUM	AVERAGE	MAXIMUM	UNIT	EX	ANALYSIS	TYPE	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****				*****	11.4	(04)	N/A	FOUR/ WEEK	GRAB	
00010 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****		R 1.2 2		*****	REPORT MAXIMUM	DEG.C		FOUR/ WEEK	GRAB	
TEMPERATURE, WATER DEG. CENTIGRADE	SAMPLE MEASUREMENT	*****	***** <u>U</u>	S. EPA REGIO	10 50500CEMENT	*****	9.8	(04)	N/A	FOUR/ WEEK	GRAB	
00010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	ARXERY (1)	OFFICE OF CC	****	CHFORGEMENT	*****	REPORT MAXIMUM	DEG.C		FOUR/ WEEK	GRAB	
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	****	*****	****	1.5	****	*****	(19)	N/A	FOUR/ WEEK	GRAB	
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	REPORT MO MIN	*****	***************************************	MG/L		FOUR/ WEEK	GRAB	
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	1	*****	(26)	*****	200	*****	(19)	N/A	FOUR/ WEEK	COMP24	
00310 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	######################################	LBS/DY	*****	REPORT MO AVG	****	MG/L		FOUR/ WEEK	COMP 24	
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	****	35487	(26)	*****	*****	150	(19)	0	FOUR/ WEEK	COMP24	
00310 W 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	90100 DAILY MX	LB\$/DY		*****	300 DAILY MX	MG/L		FOUR/ WEEK	COMP 24	
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT		32380	(26)	*****	131	140	(19)	0	FOUR/ WEEK	COMP24	
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	72100 MØ AVG	75100 WKLY AVG	LBS/DY	*****	240 MO AVG	250 WKLY AVG	MG/L		FOUR/ WEEK	COMP 24	
PH	SAMPLE MEASUREMENT	*****	*****	****	7.3	*****	7.7	(12)	N/A	FOUR/ WEEK	GRAB	
00400 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	Page 100 pa	*****	***	REPORT MINIMUM	Andrews Arthur Andrews	REPORT MAXIMUM	SU		FOUR/ WEEK	GRAB	
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AMFAMILIAR WITH TINFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUAL									ONE DATE			
Craig Woolard, P.E., Ph.D. IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT												
Director, Treatment Division		PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND				SIGNATURE OF PRINCIPAL EXECUTIVE			(907)564-2799		08/03/10	
TYPED OR PRINTED		IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penaltics under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				OFFICER OR AUTHORIZED AGENT			Name of the last o		MO DAY	
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)						Forms by WindowChem(707)864-0845;p/n11090;v5.01;4/1/96. Rev. 1/05, Br						

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

The final effluent autosampler is normally taken off line on Saturdays, Mondays, and Wednesdays for line cleaning and pigging for approximately 1.5 hours each time; the composite samples for BODs, TSS, etc. are therefore slightly less than a 24HC on these days.

PAGE 1 OF 3

PERMITTEE NAME/ADDRESS:

ADDRESS:

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved OMB No. 2040-0004

NAME: ANCHORAGE, MUNICIPALITY OF

3000 ARCTIC BLVD.

ANCHORAGE

AK 99503

DISCHARGE MONITORING REPORT (DMR) AK0022551 PERMIT NUMBER

001 A DISCHARGE NUMBER

MAJOR (SUBR 02) F - FINAL

FACILITY:

JOHN M. ASPLUND WWTF---301 (H)

LOCATION: ANCHORAGE, AK 99502 ATTAI.

MAADIADDENAA DE ACKLINAAD ANAAMI

MONITORING PERIOD *** NO DISCHARGE 08 | 02 | 01 08 | 02 | 29 FROM TO

ATTN: MARK PREMO P.E. GEN MGR. AWWU				NOTE: Read instructions before completing this form.							
PARAMETER		QUAN	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				FREQUENCY OF	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNIT	EX	ANALYSIS	TYPE
PH	SAMPLE MEASUREMEN	T *****	*****	***	7.0	*****	7.3	(12)	0	FOUR/ WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMEN	[] [] [] [] [] [] [] [] [] []	and the state of t	***	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		FOUR/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMEN		****	(26)	*****	202	*****	(19)	N/A	FOUR/ WEEK	COMP24
00530 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	*****	LBS/DAY	*******	REPORT MO AVG	******	MG/L		FOUR/ WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMEN	T *****	16490	(26)	*****	****	60	(19)	0	FOUR/ WEEK	COMP24
00530 W 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	Ī <u>*****</u>	57000 DAILY MX	LBS/DAY	*****	*****	190 DAILY MX	MG/L		FOUR/ WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMEN	1	14079	(26)	****	50	55	(19)	0	FOUR/ WEEK	COMP24
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	51000 MO AVG	54000 WKLY AVG	LBS/DAY	*****	170 MO AVG	180 WKLY AVG	MG/L		FOUR/ WEEK	COMP24
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMEN	T ******	*****	****	*****	16.8	****	(19)	N/A	MONTH	COMP24
00610 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		*****	***	*****	REPORT MO AVG	AXXXX	MG/L	N/A	ONCE/ MONTH	COMP24
FECAL COLIFORM, MPN, EC MED, 44.5C	SAMPLE MEASUREMEN	T ******	****	****	****	7	*****	(30)	0	THREE/ WEEK	GRAB
31615 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT					850 MO GEO	*****	MPN/ 100ML		THREE/ WEEK	GRAB
FLOW IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMEN	28.334	MA LÍTÍL MA	R 1 ⁽⁰³⁾ 20		****	*****	***	N/A	CONTIN UOUS	RCORDR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		*****	_MGD_		*****	*****	**** TELEPH		CONTIN UOUS	RCORDR
Craig Woolard, P.E., Ph.D.		ERTIFY UNDER PENALTY OF LAW FORMATION SUBMITTED HERE MEDIATELY RESPONSIBLE FOR	IFY UNDER PENALTY OF LAW THAT IH VE PERSONALLY EXAMPLE AND APAULIAR WITH THE MATION SUBMITTED HEREIN; AND EAST OF MY NAME OF THESE OF THE SUBMITTED DIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED				MITTED (1/1/1/1)			DATE	
Director. Treatment Division PENAL		NALTIES FOR SUBMITTING FAI	MATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICAN TIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND ONNERN. SEE 18 U.S.C. \$1001 AND 33 U.S.C. \$1319, (Penalties under these statutes may include fines up to				AND SIGNATURE OF PRINCIPAL EXECUTIVE			08/03/10	
TYPED OR PRINTED		and or maximum imprisonment of between 6 months and 5 years.)				OFFICER OR AUTHORIZED AGENT			YEAR I	MO DAY	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Forms by WindowChem(707)864-0845;p/n11090;v5.01;4/1/96, Rev. 1/05, Bit

Due to sickness of analyst/sampler during the week of Feb. 3rd - Feb. 9th only three samples were taken for temp, pH, and dissolved oxygen. 5 samples taken the following week. Due to plant operator error weekend of Feb. 23rd only three valid Fecal Coliform analyses were performed that week. 4 valid samples analyzed the following week.

PERMITTEE NAME/ADDRESS:

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

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NAME: ADDRESS:

ATTN:

ANCHORAGE, MUNICIPALITY OF

3000 ARCTIC BLVD

ANCHORAGE

AK 99503

DISCHARGE MONITORING REPORT (DMR) AK0022551 PERMIT NUMBER

001 A DISCHARGE NUMBER

MA.IOR (SUBR 02) F - FINAL

FACILITY: JOHN M. ASPLUND WWTF----301 (H)

LOCATION: ANCHORAGE, AK 99502

MONITORING PERIOD 08 | 02 | 01 FROM TO 08 | 02 | 29

*** NO DISCHARGE NOTE: Read instructions before completing this form.

MARK PREMO P.E. GEN MGR. AWWU QUANTITY OR LOADING QUANTITY OR CONCENTRATION FREQUENCY PARAMETER NΩ SAMPLE ΕX TYPE ANALYSIS **AVERAGE** MAXIMUM UNITS AVERAGE MAXIMLIM UNIT MINIMUM CHLORINE. TOTAL SAMPLE **EVERY** all a decades also decades also -5--f--l--1--f--l-----***** n 0 9 GRAB (19)MEASUREMENT RESIDUAL 3 HRS 50060 1 0 0 PERMIT 1.2 EVERY en annual a ***** GRAB REQUIREMENT ***** ***** *** EFFLUENT GROSS VALUE ------DAILY MX MG/L 4 HRS SAMPLE BOD 5-DAY ONCE/ ----تومله مله مله مله مله **** 35 ***** ***** N/A (23)CALCTD MEASUREMENT PERCENT REMOVAL MONTH 181010 K 0 0 PERMIT R = 2(0)R 1 PFR-ONCE/ ki ki k CALCTD REQUIREMENT ***** -----MO AVG PERCENT REMOVAL CENT MONTH SOLIDS, SUSPENDED SAMPLE ONCE/ والمراجع المراجع المرا -1-----*** 75 ***** N/A (23)CALCTD MEASUREMENT PERCENT REMOVAL MONTH 81011 K 0 0 PERMIT REPORT PER-ONCE/ ***** N/A REQUIREMENT ***** ***** PERCENT REMOVAL -MO AVG CENT MONTH OFFICE OF COMPLIANCE AND . EPA REGION 10 NAME / TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT THAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE TELEPHONE DATE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS Craig Woolard, P.E., Ph.D. IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT **Director, Treatment Division** PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND SIGNATURE OF PRINCIPAL EXECUTIVE 08/03/10 (907)564-2799 IMPRISONMENT, SEE 18 U.S.C. \$1001 AND 33 U.S.C. \$1319. (Penalties under these statutes may include fines up to TYPED OR PRINTED \$10,000 and or maximum imprisonment of between 6 months and 5 years.) OFFICER OR AUTHORIZED AGENT YEAR MO DAY AREA CODE NUMBER Forms by WindowChem(707)864-0845;p/n11090;v5.01;4/1/96, Rev. 1/05, Bit

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WET Testing results for January 28th-29th composite sample included with this report. See attached analytical report for specifics.